South Dakota Board of Nursing

_____'s Medication Administration Training Program Log: *We Care Online*

(Name of your program)

Approved programs are required to retain student information and to provide documentation to students upon request (ARSD 20:48:04.01:14)

Enrolled Student Name	Unit 1 Test Score		Unit 2 Test Score		Unit 3 Test Score		Final test Score 85% on each exam is required to pass; may retake each exam one time		Skills Performance Evaluation		Date Completed Certificate Awarded	Date Failed And/or Withdrew From Program & Reason
	1st Attempt	2nd Attempt	1st Attempt	2nd Attempt	1st Attempt	2nd Attempt	1st Attempt	2nd Attempt	Pass	Fail		